Texas Department of Criminal Justice Standard/Supplemental Employment Discrimination Training Contract Employee and Intern Acknowledgment Form 2016

Contract Employee Month/Day of Birth: mm/dd	Unit/Depar	rtment:
Contract Employee Name: (Please Print) Last	First	MI
I hereby acknowledge that on this date I have atten provided by the TDCJ, which included viewir Discrimination, Equal Employment Opportunity Topyright © 2016.	ng the Executive Director	's Statement on Illegal
Contract/Intern Employee's Signature	Date ((mm/dd/yyyy)
Note to Contract Employee: With few exceptions, y information the Agency collects about you; and (2) u to receive and review the collected information. Ur entitled to request, in accordance with the Agency collected about you be corrected.	nder Sections 552.021 and 552 nder Section 559.004 of the Go	.023 of the Government Code overnment Code, you are also
Form Distribution: Original - Separate Unit/Department File for Contract E	mployees and Interns	